CLAIMS ONLY

Application Number	Filing Date
10/632343	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			✓				51						
2				✓			52						
3							53						
4				✓			54						
5							55						
6							56						
7				✓			57						
8							58						
9							59						
10			✓				60						
11							61						
12				✓			62						
13							63						
14							64						
15							65						
16			✓				66						
17							67						
18				✓			68						
19							69						
20			✓				70						
21				✓			71						
22				✓			72						
23				✓			73						
24				✓			74						
25				✓			75						
26				✓			76						
27				✓			77						
28				✓			78						
29				✓			79						
30							80						
31							81						
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37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep			3				Total Indep						
Total Depend			17				Total Depend						
Total Claims			20				Total Claims						